

PAVEMENT MARKINGS

Pavement Markings Inspector Qualification

Candidates who successfully complete this course will be qualified to inspect pavement markings on Kentucky projects. Candidates will be instructed in the appropriate use of the LTL Retroreflectometers and retroreflectivity requirements of various pavement marking materials currently used on construction projects. Candidates will also be instructed in the use of Excel Spreadsheets to download retroreflectivity data from the LTL and calculate passing percentages of installed markings. Current Specifications and Kentucky Methods governing the evaluations of pavement markings will also be reviewed. Candidates will be required to successfully complete both a written and practical exam to be qualified as a Pavement Markings Inspector.

Prerequisites: None

Pavement Markings Inspector Qualification (Exam Challenge)

Candidates who have successfully completed the Pavement Markings Inspection course may elect to attend an exam challenge to maintain their qualification as a Pavement Markings Inspector. Course materials will be made available in advance to be used as self study in preparation for the exam challenge. Candidates will be required to successfully complete both a written and practical exam to renew their qualification as a Pavement Markings Inspector.

Prerequisites: Successful completion of the Pavement Markings Inspection Course.

Contact Information:

Derrick Castle
Division of Materials
1227 Wilkinson Blvd.
Frankfort, KY 40601
(502) 564-3160
Fax (502) 564-7034

e-mail: Derrick.Castle@ky.gov

**KENTUCKY QUALIFIED PAVEMENT MARKINGS INSPECTOR
TRAINING REGISTRATION**

CREDIT HOURS: 14.0

REGISTRATION FEE: \$100.00

INSPECTOR ID#: _____ (3 OR 4 DIGIT CODE FROM CURRENT QUALIFICATION CARD)

NAME: (Last, First, M.I.) _____

DATE OF BIRTH: (mm/dd/yy) _____

HOME ADDRESS: (Apt #) _____

***CHANGE ()** (Street) _____

(City) _____

(State, Zip) _____

Phone: () _____ Email: _____

***CHECK IF CHANGED FROM HOME ADDRESS ON RECORD.**

COMPANY ADDRESS: (Company Name) _____

***CHANGE ()** (State Employees) District _____ Crew _____

(Address) _____

Phone: () _____ Email: _____

***CHECK IF CHANGED FROM COMPANY ADDRESS ON RECORD.**

INDICATE PREFERRED COURSE DATE:

February 10, 2006 (Exam Challenge) _____

February 16-17, 2006 _____

February 23-24, 2006 _____

(Location: Transportation Cabinet Office Building, Frankfort, KY)

March 9-10, 2006 _____

(Location: Bowling Green Technical College, Bowling Green, KY)

INSPECTOR IDENTIFICATION NUMBER (INSPECTOR ID#) IS A **REQUIRED** FIELD. NO REGISTRATION WILL BE PROCESSED WITHOUT THE REGISTRATION FEE AND A CORRECTLY COMPLETED REGISTRATION FORM. MAKE CHECKS PAYABLE TO THE KENTUCKY TRANSPORTATION CABINET. ALL FEES ARE NONREFUNDABLE. ALL FEES FOR STATE EMPLOYEES WILL BE INTERACCOUNTED. ALL REGISTRATIONS MUST BE RECEIVED 2 WEEKS PRIOR TO THE START DATE OF EACH CLASS. CLASS SIZE IS LIMITED TO 24 PARTICIPANTS. MAIL COMPLETED FORM AND REGISTRATION FEE TO:

**Leigh Ann Schrader
KQTL Database Administrator
Division of Materials
1227 Wilkinson Boulevard
Frankfort, KY 40601**